

9012-16-05

ORIGINAL
(Red)

FIT REGION 3
NUS CORPORATION
WORK PLAN FOR CONDUCTING
A PRELIMINARY ASSESSMENT OF

Carol Cobb Company

REV - 0

TDD No. F3- 9012-16

Charge No. APNWRP

EPA Site No. PA-2851

Submitted By

Steve Sutton
FIT Name, Title
Biologist

1/10/91
Date

Reviewed and Approved By

Richard M. Brown
FIT OM

1/16/91
Date

Reviewed and Approved By

Patricia L. Armstrong
RQAR

1/17/91
Date

Rev. 1

FIT Name, Title

Date

FIT OM

Date

RQAR

Date

Rev. 2

FIT Name, Title

Date

FIT OM

Date

RQAR

Date

ORIGINAL
(R0090)

Assignment Description

FIT 3 has been assigned to conduct a preliminary assessment at the Carol Cable Company site. The objective of a preliminary assessment is to determine the need for further studies under the EPA/CERCLA program.

Task Breakdown

The task breakdown for a preliminary assessment is as follows.

- 1) Review background information.
- 2) Contact state and local agencies for relevant information.
- 3) Arrange for site access.
- 4) Conduct a brief on- and off-site inspection to determine potential sample locations.
- 5) Prepare and submit draft preliminary assessment report, including proposed sampling plan and rationale, if applicable.
- 6) Address peer review comments and finalize report.

7) Perform an EPI PA.

Estimated Technical Hours

The estimated technical hours for completing this project are 225.

Project Staff

Project Manager

Steve Sotung

Site Safety Representative

Shari Harris-Denning

Other: N/A



See attached safety plan

Proposed Schedule

See attached site safety plan

Background Data/Data Assessment Summary

See attached site safety plan

Required Resource List

No limited resource/equipment needed



List any limited resources/equipment needed

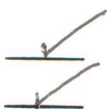
Quality Assurance Applicability

The following sections of the Superfund Division Quality Assurance Manual apply to the performance of this assignment.

<input checked="" type="checkbox"/>	QAP	2.5	Work Plans
<input checked="" type="checkbox"/>		3.1	Collection of Evidentiary Field Data
<input checked="" type="checkbox"/>		4.1	Off-Site Reconnaissance
<input checked="" type="checkbox"/>		4.2	On-Site Inspection
<input checked="" type="checkbox"/>		8.1	Controlled and Accountable Documents
<input checked="" type="checkbox"/>		8.2	Issuance and Distribution of Controlled Documents
<input checked="" type="checkbox"/>		8.4	Technical Reports
<input checked="" type="checkbox"/>		11.1	Implementation of Measuring and Test Equipment Controls
<input checked="" type="checkbox"/>		13.1	Nonconformance Reporting, Evaluation, and Disposition
<input checked="" type="checkbox"/>		14.1	Implementation and Documentation of Corrective Actions
<input checked="" type="checkbox"/>		15.1	Storage and Retrieval of Quality Assurance Records and Project Files

Quality Control Requirements

Equipment used for the completion of this assignment will be calibrated and maintained according to SOPs contained in the FIT 3 Regional Operations Manual.



SOP 11








Use, Calibration, and Maintenance of the HNU PI-101

SOP 12

Use, Calibration, and Maintenance of the Radiation Mini-Alert

Technical Approach

All activities will be conducted according to the FIT 3 Regional Operations Manual.

	SOP II1	Documentation of Logbook
	SOP II2	Documentation of Photographs
	SOP II3	Documentation of Telecons
	SOP II4	Documentation of Filing and Docketing
	SOP III1	Review of Technical Reports
	SOP III2	Report Format for Preliminary Assessments and Site Inspections
	SOP III3	Reporting On-/Off-Site Activities

Report/Product Requirements

Report will consist of a completed EPA Form T-2070-12 and a written narrative presenting further information obtained during the completion of the assignment.

Report/Product Review

The FITOM or designee will be responsible for the quality verification of the final report.

(red)

Documents to be Generated

Check below to indicate the documents that will be generated in the course of the project (both deliverable and non-deliverable):

- | | |
|-------------------------------------|------------------------------|
| <input checked="" type="checkbox"/> | Final Report |
| <input checked="" type="checkbox"/> | Draft Report |
| <input checked="" type="checkbox"/> | Logbooks |
| <input checked="" type="checkbox"/> | Photographs and Negatives |
| <input checked="" type="checkbox"/> | Well Questionnaires |
| <input checked="" type="checkbox"/> | Safety Plan |
| <input checked="" type="checkbox"/> | Site Safety Follow-Up Report |
| <input checked="" type="checkbox"/> | Task-Related Correspondence |
| <input checked="" type="checkbox"/> | Report Processing Forms |
| <input checked="" type="checkbox"/> | Telecon Records |
| <input checked="" type="checkbox"/> | TDD |
| <input checked="" type="checkbox"/> | Completion Document |

Distribution

The undersigned have received, read, and understood this work plan or have attended a pre-field meeting and have discussed the contents of this work plan (must be signed by all project personnel).

Name

Date

Steve L. Thompson
Steve L. Thompson

1/8/91
1/21/91

TDD No.: 9012-16
Site Name: Carol Cable Co. ORIGINAL (Red)

SITE SAFETY PLAN

Site Name: Carol Cable Company Site Contact: Mrs. Helen Berry
Address: 3101 Pleasant Phone Number: 814-944-5002
Valley Blvd. Altoona, Other Contacts: Mr Frank Mathew. 814-944-50
Pennsylvania. 16603 EPA: DONNA SANTIAGO - 215-597-1110
State: Michael Union
814-946-7290

Purpose of Site Visit: EPI - PA
Proposed Date of Work: January 23, 1991

Proposed Site Investigation Team

<u>NUS Personnel:</u>	<u>Responsibilities:</u>
<u>Steve Sotting</u>	<u>Site leader.</u>
<u>Shari Harris-Dumming</u>	<u>ASTL # 550.</u>

<u>Other:</u>	<u>Purpose:</u>

Plan Preparation

• Prepared by: Steve Sotting 1/8/91
Date

Approvals

• Regional Health and Safety Manager: Bill Bures 1/16/91
Date
• Regional Manager: Richard M. Cromer 1/16/91
Date

TDD No.:

9012-16

Site Name:

Carol Cable Company

ORIGINAL
(Red)**Background Information**

Site Status:



Active

☐ Inactive☐ Unknown**Site Description (be specific; include topography, structures, etc.):**

The site is located in Aetona, PA. in a populated area. Residential tracts are located north, west and south of the site. Rural areas are found to the east of the site. Carol Cable Co. is located at the base of a 2,100 foot hill that rises to its peak approximately 1.75 miles east of the site. Several commercial businesses are found within a three mile radius of the site. One large manufacturing building is located on the property. The size of this building is unknown. The property line is defined by a chain-link fence.

Site History:

Until 1981, the site was owned by GTE Products Corporation. In 1981, Philips ECB Inc. bought the property. Philips ECB, Inc. is a North American Philips Company. The manufacture of electronic receiving tubes remained unchanged after the transition. GTE began their operations in 1958. Philips utilized a 3000 gal. Underground Storage Tank to store waste ethyl alcohol. The start up date for this tank is unknown, however. In March 1985, they discontinued use of this tank. In December 1989, Philips ECB, Inc. was purchased by Carol Cable Co. They currently make electrical equipment for internal combustion engines.

Monitoring Used on Previous Site Work or Previous Sampling Data:

No data is available at this time.

TDD No.:

9012-16

Site Name:

Carol Cable Company ORIGINALHazard Evaluation

• Waste Types: ☒ Liquid ☐ Solid ☒ Sludge ☐ Vapor

• Characteristics: ☒ Corrosive ☒ Ignitable ☐ Radioactive

☐ Volatile ☒ Toxic ☒ Reactive

☐ Unknown ☐ Other: _____

Task: Site Walk, EPI PALow ☒Medium ☐High ☐

• Identification of Hazards/Hazard Assessment:

NO HAZARDS ARE EXPECTED. PRECAUTIONS WILL BE TAKEN TO AVOID ANY HAZARDS. IF HNU OR MINI ALERT READINGS ABOVE BACKGROUND ARE OBTAINED, FIT MEMBERS WILL LEAVE THE AREA ASAP.

Task: _____

Low ☐Medium ☐High ☐

• Identification of Hazards/Hazard Assessment:

Task: _____

Low ☐Medium ☐High ☐

• Identification of Hazards/Hazard Assessment:

Task: _____

Low ☐Medium ☐High ☐

• Identification of Hazards/Hazard Assessment:

Overall Hazard:☐ Serious☐ Moderate☒ Low☐ Unknown

TDD No :

90/2-16

Site Name:

CAROL CABLE CO.

Hazardous/Toxic Known or Suspected Materials	Concentration	Media	Toxic and Pharmacological Effects	IP	PEL, TLV, IDLH	Reactivity, Stability, Flammability	Special Monitoring Instrument
OPERATIONS IN 1980, THE CHARACTERISTICS THAT WASTES AT THE SITE ARE LIMITED TO PAINT WASTES THAT ARE TOXIC, AND REACTIVE. CURRENTLY, HOWEVER, THE FOLLOWING IS A LIST OF POSSIBLE HAZARDOUS MATERIALS.							
TOLUENE.	UNKNOWN	Liq.	Fatigue, weakness, dizziness, head, muscle pain, insomnia, dermatitis, photophobia.	8.82	PEL - 100 ppm TLV - 100 ppm IDLH - 2000 ppm	STRONG OXIDIZERS	N/A.
METHYL ETHYL KETONE.	UNKNOWN	Liq.	Irritated eyes, nose, head dizziness.	9.53	PEL - 200 ppm TLV - 200 ppm IDLH - 3000 ppm	VERY STRONG OXIDIZERS	N/A.
Pyridine.	UNKNOWN.	Liq.	headaches, nervousness, dizziness, insomnia, NAs urine freq. vent, eye irrit, derm. Liver, kidney damage.	9.32	PEL - 5 ppm TLV - 5 ppm IDLH - 3600 ppm	STRONG OXIDERS	

ORIGINAL
(Red)

TDD No.:

9012-16

Site Name:

Carol Cable Co.

Task:

EPIA SITE WALK

Required Level(s) of Protection:

Task	Name	Respiratory	Clothing Cotton = C Saranex = X Tyvek = T Poly = P	Gloves Butyl = B Cotton = C Latex = L Viton = V Neoprene = N	Boots Fireman's = F Latex = L Work = W Slush = S Insulated = I	Other; Modifications
PM	Steve Sotung	D	C	N/A	W	
SSO	Shari Harris-Dunning	D	C	N/A	W	
SMO						
Surveillance	Steve Sotung	D	C	N/A	W	
(PA, Site Recon, Etc.)	Shari Harris-Dunning	D	C	N/A	W	
If HNU readings exceed background, team members will note the readings in the logbook and move to an area where HNU readings do not exceed background.						
Samplers						
Other						
Decontamination						

ORIGINAL
(Red)

Proposed On-Site Activities

Site visit will consist of interview followed by a site walk to identify any SWMUs. Continuous monitoring during site walk with the HNU and mini-alert will be performed.

Monitoring Procedures

• Site Monitoring Equipment:

☒ HNU (Probe: 10.2)

☐ Victoreen Radiation Detector

☐ OVA

☒ Radiation Mini-Alert/Monitor 4

☐ Monotox (☐ CN ☐ H₂S)

☐ Explosimeter

☐ Draeger Tube and Pump

☐ O₂ Meter

Type: _____

☐ Enmet (combustible gas/O₂/CO/H₂S)

Other: _____

• Methods and Frequency of Surveillance: (for compounds greater than 10 percent PELs, see page 4)

Frequent monitoring with the HNU or OVA and the Mini-alert in waste storage areas, raw products storage areas, on-site and disposal areas.

Monitoring Equipment Calibration
☒ HNU

- As per manufacturer's recommendations, a field calibration is necessary once every three days. Calibration dates are recorded in the project logbook.

☐ OVA

- As per manufacturer's recommendations, a field calibration is necessary every three days. Calibration dates are recorded in the project logbook.

☒ Mini-Alert

- A battery check and a response check were made prior to leaving the FIT office and will be made immediately prior to instrument use in the field. This field procedure will be documented in the logbook.

☐ Other

TDD No.:

9012-16

ORIGINAL

Site Name:

Carol Cable Co.

(Red)

Decontamination and Disposal

Personnel Decontamination: Check level to be utilized.

- ____ Level A - Segregated equipment drop, boot cover and glove wash, boot cover and glove rinse, tape removal, boot cover removal, outer glove removal, suit and hard hat removal, SCBA backpack removal, inner glove wash, inner glove removal, inner clothing removal, field wash redress.
- ____ Level B - Segregated equipment drop, boot cover and glove wash, boot cover and glove rinse, tape removal, boot cover removal, outer glove removal, SCBA backpack removal, suit and hard hat removal, inner glove removal, field wash.
- ____ Level C - Segregated equipment drop, boot cover and glove wash, boot cover and glove rinse, tape removal, boot cover removal, outer glove removal, suit/safety boot wash, suit/safety boot rinse (canister or mask change), safety boot removal, splash suit removal, inner glove removal, field wash.
- ____ Level D - Segregated equipment drop, boot and glove wash, boot and glove rinse, field wash.

☒ No personnel decontamination is necessary.

____ Modifications (specify):

Equipment Decontamination:

N/A

Disposal Procedure for Investigation-Derived Materials:

All materials generated will be bagged in plastic bags and disposed of properly.

Ionizing Radiation:

Normal background 0.01 to 0.02 mR/hr

- If less than 2 mR/hr, continue investigation with caution
- If greater than 2 mR/hr, evacuate site

* Note: Background 10 to 20 CPM on mini-alert

TDD No.:

9012-16

ORIGINAL

Site Name:

Card cable Co

(Red)

SITE OPERATING PROCEDURES/SAFETY GUIDELINES

1. Always observe the buddy system. Never enter or exit a site alone, and never work alone in an isolated area. Never wander off by yourself.
2. Always maintain line-of-sight.
3. Practice contamination avoidance. Never sit down or kneel, never lay equipment on the ground, avoid obvious sources of contamination such as puddles, and avoid unnecessary contact with on-site objects.
4. No eating, drinking, or smoking outside the designated "clean" zone.
5. In the event PPE is ripped or torn, work shall stop and PPE shall be removed and replaced as soon as possible.
6. Be alert to any unusual changes in your own condition; never ignore warning signs. Notify Health and Safety Coordinator as to suspected exposures or accidents.
7. A vehicle will be readily available exclusively for emergency use. All FIT personnel going on site shall be familiar with the most direct route to the nearest hospital.
8. In the event of direct skin contact, the affected area shall be washed immediately with soap and water.
9. Copies of the health and safety plan shall be readily accessible at the command post.
10. Note wind direction. Personnel shall remain upwind whenever possible during on-site activities.
11. Never climb over or under refuse or obstacles. Use safety harness/safety lines when sampling lagoons, streambeds, and ravines with steep banks.
12. Hands and face must be thoroughly washed before eating, drinking, etc.
13. Any modifications to this safety plan must be approved by the RHSM or designee.

Special Procedures:

In addition to NUS Health and Safety procedures, FIT 3 team members will follow the safety regulations required by the facility.

TDD No.:

9012-16

ORIGINAL

Site Name:

Carol Cable Co. (B3)

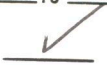
SITE PROCEDURES (continued)

Safety Glasses



Safety glasses will be worn in heavily wooded areas where the potential of an eye injury may exist.

LifeAir₁₀ Escape Packs



LifeAir₁₀ escape packs will be carried or located within proximity to FIT 3 members whenever an SCBA is not readily available on site.

Heat and Cold Stress Monitoring

N/A. Site WALK will take place in side Manufacturing building.

Team members will follow heat stress monitoring procedures.

Team members will follow cold stress monitoring procedures.

Confined-Space Entry

☒ X

No attempt will be made to enter abandoned buildings, manholes, tanks, or any other confined areas.

Other: Team members will be entering active buildings in order to perform EPI/PA activities. Since these buildings are occupied by facility personnel throughout the workday and they are being regulated by other OSHA standards, they are deemed safe for occupancy and NUS team members may enter these areas to perform their PA activities. NUS personnel will follow standard industrial safety protocol and any other special protocol established by the facility health and safety requirements.

Medical Surveillance



No site-specific medical surveillance is required for this task.

Medical surveillance will be as follows:

Personnel Monitoring



Personnel monitoring will include only the use of the TLD badge. No further personnel monitoring is required.

Personnel monitoring will consist of:

9012-16

Site Name:

Cable Co.

ORIGINAL
(Red)

Page 10 of 16

Forms/Safety Plan

[illegible]

EMERGENCY SITUATIONS

Air Releases or Fire/Explosion:

In the event of an unexpected air release or fire/explosion, on-site personnel will travel at a right angle to the upwind direction. The site safety officer (SSO) will then account for all personnel and notify the proper emergency agencies.

In the event the SSO is unavailable, the project manager will assume these responsibilities.

Emergency Site Control:

In the event of an emergency, the SSO will discourage any unauthorized personnel from entering the site. If necessary, the SSO will contact the proper authorities.

Personnel Injury:

If on-site personnel require emergency medical treatment, the following steps will be taken:

1. Evaluate the nature of the injury.
2. Decontaminate to the extent possible prior to administration of first aid or movement to emergency facilities.

First Aid Procedures:

- Skin Contact: Remove contaminated clothing. Wash immediately with water. Use soap if available.
- Inhalation: Remove from contaminated atmosphere. Apply artificial respiration, if necessary. Transport to hospital.
- Ingestion: Never induce vomiting on an unconscious person. Also, never induce vomiting when acids, alkalis, or petroleum products are suspected. Contact the poison control center.
- Equipment Failure: In the event that air monitoring equipment fails to operate, all personnel will exit the site immediately and notify the RHSM or designee for further instructions.

TDD No.:

9012-16

Site Name:

Carol Cook Co. ORIGINAL (Red)

Communication Procedures:

Verbal Communication is the emergency signal to indicate that all personnel should leave the exclusion zone.

The following standard hand signals will be used in case of failure of radio communications:

- Hand gripping throat Out of air, can't breathe
- Grip partner's wrist or both hands around waist Leave area immediately
- Hands on top of head Need assistance
- Thumbs up OK; I am all right; I understand
- Thumbs down No; negative

The following will be used on an "as-needed" basis (check proper response):

N/A

_____ Channel _____ has been designated as the radio frequency for personnel in the exclusion zone. All other on-site communications will use channel _____.

_____ Telephone communication to the command post should be established as soon as practicable. The phone number is: (_____) _____.

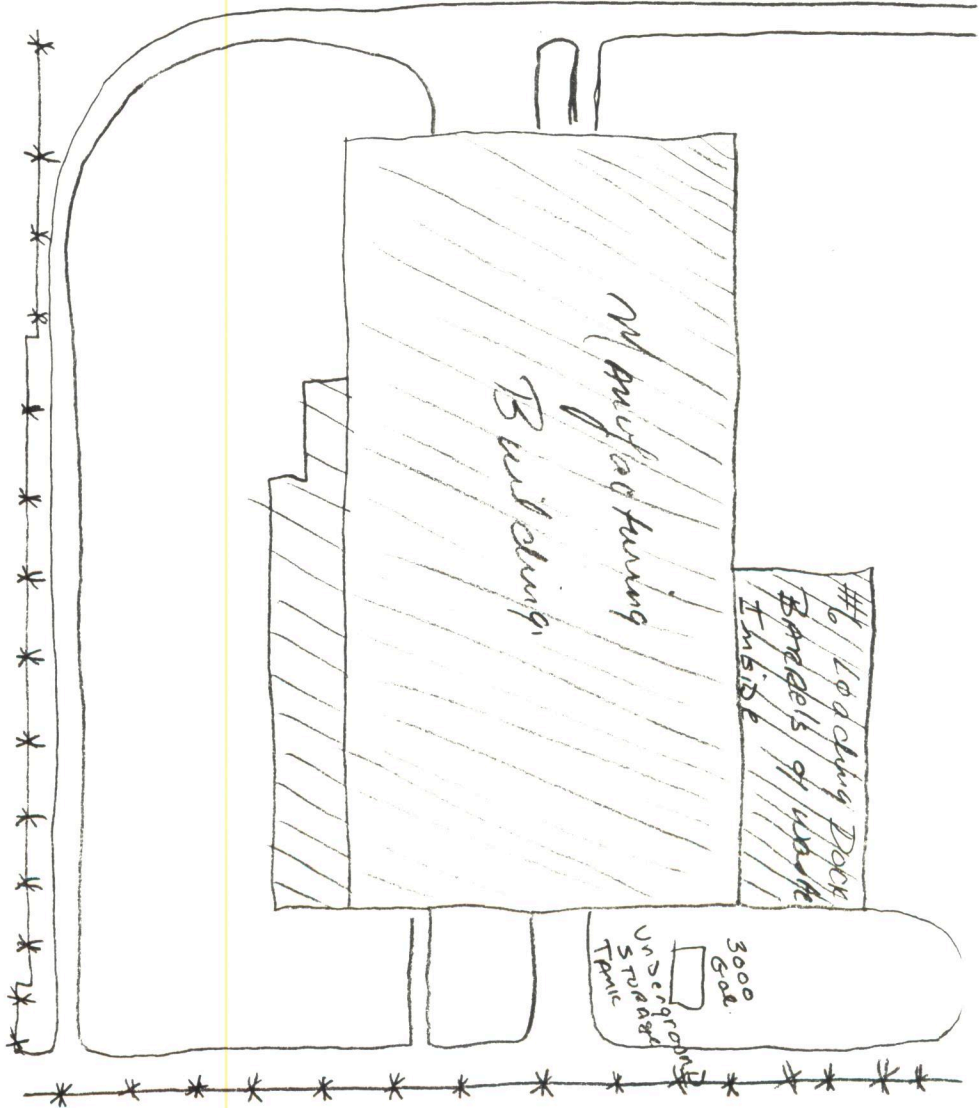
_____ Channels 1 and 2 have been designated as the radio frequency for personnel in the exclusion zone. Team members will make sure that all radios are on the same channel before leaving the command post.

9012-16
Carol Cable (ORIGINAL Red)



Carol
Cable
Company

Planned Co by Blvd



Paved
Parking

Concrete
LG ARE

Paved
Parking

TDD No.:

9012-16

Site Name:

Carol Cable Co

ORIGINAL
(Red)Emergency Information:

● Local Resources:

- Ambulance (name): Amer Phone: - 814 943-9813
- Hospital (name): Mercy Hospital Phone: 814-944-1681
- Police (local or state): Altoona City Police Phone: 911
- Fire Department: Altoona City Fire Dept. Phone: 949-2510
(name and volunteer?)
- Radio Channel: _____ Phone: _____
- Nearest Phone: CAROL Cable Co. Phone: 814-944-5002

● Office Resources:

- Region III FIT Office (215) 687-9510
- EPA RPO - Gregory Ham (215) 597-8229
- Office Manager - Garth Glenn (home) (215) 947-5806
- Operations Manager - Andrew Frebowitz (home) (215) 362-4734
- Safety - Marcia Case (home) (215) 692-7729
- Safety - Bill Barnes (home) (215) 326-5194
- Zone - Paul Clay (office) (703) 522-8802

● Emergency Contacts (medical and health):

* NUS Consulting Physician - University of Pittsburgh

Office (412) 648-3240

Please follow procedures as outlined on the following page.

* Elmer Burd (NUS Zone Health and Safety Manager)

Office (412) 788-1080
Home (412) 335-0205

* Regional Health Maintenance Program

- Thomas Jefferson Hospital
Cassie (215) 928-6918- Occupational Health Center
Michael LeWitt, M.D. (215) 431-2262

* Poison Information Center (215) 922-5523

* National Response Center (800) 424-8802
(FOR ENVIRONMENTAL EMERGENCY ONLY)

Directions to Hospital (attach map): From C.C.Co. - Make left out of the parking lot -
approximately 1/8 mile make right on Union Ave. Follow for approx.
1.5 mile to 26th Street. MAKE left on 26th Street. Hospital
is on left.

TDD No.:

9012-16.

Site Name:

Carol Cable C. ORIGINAL
(Red)

EMERGENCY PHYSICIAN ACCESS PLAN

NUS CORPORATION SUPERFUND DIVISION

DECEMBER 1986

A. MONDAY THROUGH FRIDAY, 9:00 AM TO 5:00 PM

Dial the (412) 648-3240 number. When answered, state that:

1. You are calling from NUS Corporation.
2. This is an emergency call.

Program staff will be alerted how to contact the physician designated to provide emergency coverage on that day. Collect calls will be accepted.

B. EVENINGS, WEEKENDS, AND HOLIDAYS

Dial the (412) 648-3240 number. An operator from the answering service will answer the telephone. Do the following:

1. Tell the operator that you are calling from NUS Corporation
2. Tell the operator that this is an emergency call.
3. Give her your name.
4. Give her the telephone number where the physician is to call. Be certain that she has written the correct number (area code and seven digits).
5. If you do not receive a call back within 15 minutes, place a second call to (412) 648-3240.

Collect calls will be accepted.

C. SITUATIONS WHERE EMPLOYEE REQUIRES IMMEDIATE TRANSPORT TO A HOSPITAL

If the situation is life threatening (i.e., cardiac arrest or person not breathing), call the emergency medical services system and transport the person to the nearest hospital with advanced life support capabilities.

After obtaining assistance as stated above, call the (412) 648-3240 number and follow the procedures in A or B as appropriate.

9012-16 ORIGINAL
Carol Cable Co.

